

# CHAIN OF CUSTODY RECORD/LABORATORY ANALYSIS REQUEST

(Shaded areas to be completed by lab personnel.)

REPORT TO <b>GARY MAY / DAVE GOTO</b>		ORGN. <b>R-1150</b>	MAIL STOP <b>65-41</b>	PHONE <b>234-5600</b>	CHARGE LINE/CONTROL NUMBER		
CC: <b>ENVIRO TECHS</b>		ORGN. <b>68000</b>	MAIL STOP <b>94-30</b>	SAMPLERS: <b>D.K.</b>			
SAMPLE DESCRIPTION AND LOCATION	SAMP DATE	TIME	MATX	COLL TYPE	No. CONT	LAB ID	ANALYSIS REQUESTED (Use codes on back to indicate tests.)
1. <del>1050-0068-971006-1</del>							<del>PH, Flash, TCEP, VOA</del>
2. <b>0420-0003-971001-2</b>	<b>11/5/97</b>	<b>0900</b>	<b>L</b>	<b>G</b>	<b>3</b>	<b>97-8876</b>	<b>PH, Flash, TOT, VOA</b> <i>mk</i>
3. <b>Paint wash solvent</b>							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
Comments/Special Instructions	Relinquished by (SIGNATURE) <i>Darren Kinnisch</i>		Relinquished by (SIGNATURE)			Relinquished by (SIGNATURE)	
	Printed Name <b>Darren Kinnisch</b>		Printed Name			Printed Name	
	Date <b>11-5-97</b>	Time <b>1112</b>	Date			Time	
	Received by <i>Paula Cockerham</i>		Received by			Received by	
	Printed Name <b>Paula Cockerham</b>		Printed Name			Printed Name	
	Date <b>11/5/97</b>	Time <b>1112</b>	Date			Time	

# INSTRUCTIONS FOR COMPLETION OF THE "CHAIN OF CUSTODY/LABORATORY ANALYSIS REQUEST" FORM

(PLEASE PRINT ALL INFORMATION CLEARLY AND USE BALLPOINT PEN.)

**PAGE \_\_\_\_ OF \_\_\_\_:** Use if additional forms are required (i.e. more than 10 samples are being delivered).

**Report to:** Enter name of person to receive analysis report.

**ORGN., MAILSTOP, PHONE:** For all report recipients.

**CC:** Additional contacts for reports.

**CHARGELINE:** 7 digit or 21 digit number of requesting organization.

**SAMPLERS:** All individuals involved in sampling should print their name in this space.

**SAMPLE DESCRIPTION AND LOCATION:** Brief description of sample and Plant, Building Number, and Column or Door number where sample was collected. A total of 10 samples can be listed on a single form. Use additional forms if more than 10 samples are being delivered. Enter each phase as a separate sample.

**SAMP DATE:** Date sample taken.

**TIME:** Time sample taken. Use military time.

**MATX:** Use the following codes to identify the sample matrix:  
S = Solid SI = Sludge So = Solvent A = Aqueous O = Oil

**COLL TYPE:** Specify GRAB or Composite.

**No. CONT:** Enter the number of sample containers associated with each sample.

**LAB ID:** This section to be completed by lab personnel.

**ANALYSIS REQUESTED:** List the constituents (or groups of constituents) for which the sample is to be analyzed. The following codes are the more commonly requested analyses:

TOT MET = As, Ba, Cd, Cr, Pb, Hg, Se, Ag, Cu, Ni, Zn, Fe, Ca, Ti, Na, Mg, Al, Mn, Be, Co, Bi, V

MET = Metro Metals (Cr, Cu, Ni, Cd, Pb, Zn, Ag, As)

TCLP = Metals (Cr, Cd, Pb, Ag, Ba, As, Se, Hg)

pH = pH

Phenol = Total phenolics

DO = Dissolved Oxygen

TDS = Total Dissolved Solids

TSS = Total Suspended Solids

CN = Total Cyanide

FOG = Fats, Oils, and Grease (polar and/or non polar)

VOA = Volatile Organic Analysis

TPH = Total Petroleum Hydrocarbons

PCB = Polychlorinated Biphenyls

Chlorine in Waste Oil or Oily Wastewater

FP = Flashpoint

SS = Settleable Solids

BTEX = Benzene, Toluene, Ethylbenzene, and Xylenes

SpGr = Specific gravity

Turbidity

Conductivity

**COMMENTS/SPECIAL INSTRUCTIONS:** List in this area additional tests not listed above, special instructions or comments (i.e. meter readings, warnings, etc.).

**SIGNATURE BLOCKS:** To properly complete the chain of custody portion of this document, each time the sample(s) change possession, the person relinquishing the sample(s) should complete the left most section entitled "RELINQUISHED BY". The person receiving the sample(s) should complete the section directly below entitled "RECEIVED BY". If more than three

## DELIVER

**SAMPLES TO:** Environmental Analysis Lab  
Boeing Commercial Airplane Group  
Bldg. 4-83 Door 2  
Phone: 237-1051